AMENDMENTS TO THE CLAIMS

1.-80. (Canceled)

81. (Previously presented) A method for monitoring a response to a therapeutic protocol to prevent infection by a pathogenic agent, said method comprising determining the level of a cell surface marker selected from the group consisting of Toll-like receptors and homologs thereof wherein the efficacy of said therapeutic response is determined by a change in said level.

82. (Currently amended) The method of claim 81, wherein said level is compared to a sample selected from the group consisting of a pre-treatment sample and a control sample.

83. (Currently amended) The method of claim 81, wherein said Toll-Like receptor is selected from the group consisting of TLR-2, TLR-4 and or a homolog thereof.

84. (Previously presented) The method of claim 81, wherein said marker is affected in a manner selected from the group consisting of up-regulated and down-regulated.

85. (Previously presented) The method of claim 81, wherein said marker is determined by analyzing the mRNA or protein associated with said marker.

86. (Currently amended) The method of claim 81, wherein said pathogenic agent is selected from the group consisting of Salmonella, Escherichia, Klebsiella, Pasteurella, Bacillus, Clostridium, Corynebacterium, Mycoplasma, Ureaplasma, Actinomyces, Mycobacterium, Chlamydia, Chlamydophila, Leptospira, Spirochaeta, Borrelia, Treponema, Pseudomonas, Burkholderia, Dichelobacter, Haemophilus, Ralstonia, Xanthomonas, Moraxella, Acinetobacter, Branhamella, Kingella, Erwinia, Enterobacter, Arozona, Citrobacter, Proteus, Providencia, Yersinia, Shigella, Edwardsiella, Vibrio, Rickettsia, Coxiella, Ehrlichia, Arcobacteria, Peptostreptococcus, Candida[[.]], Aspergillus, Trichomonas, Bacterioides, Coccidiomyces, Pneumocystis, Cryptosporidium, Porphyromonas, Actinobacillus, Lactococcus, Lactobacillua, Zymononas, Saccharomyces, Propionibacterium, Streptomyces, Penicillum, Neisseria, Staphylococcus, Campylobacter, Streptococcus, Enterococcus, Helicobacter, human immunodeficiency virus (HIV), Varicella-Zoster virus (VZV), herpes simplex virus (HSV), human papillomavirus (HPV), Hepatitis B virus (HBV), Hepatitis A virus (HAV), rhinovirus, echovirus, Coxsackievirus, cytomegalovirus, flavivirus, Ebola virus, paramyxovirus, influenza virus, enterovirus, Epstein-Barr virus, Marburg virus, polio virus, rabies virus, rubella virus,

smallpox virus, rubeola virus, vaccina virus, adenovirus, rotavirus, Hepatitis C virus (HCV) and Hepatitis B virus (HBV).

87. **(Previously presented)** A method for monitoring a response to a therapeutic protocol to prevent development of a disease condition, said method comprising determining the level of a cell surface marker selected from the group consisting of Toll-like receptors and homologs thereof wherein the efficacy of said therapeutic response is determined by a change in said level.

88. **(Previously presented)** The method of claim 87, wherein said level is compared to a sample selected from the group consisting of a pre-treatment sample and a control sample.

89. **(Currently amended)** The method of claim 87, wherein said Toll-Like receptor is selected from the group consisting of TLR-2, TLR-4 and or a homolog thereof.

90. **(Previously presented)** The method of claim 87, wherein said marker is affected in a manner selected from the group consisting of up-regulated and down-regulated.

91. **(Previously presented)** The method of claim 87, wherein said marker is determined by analyzing the mRNA or protein associated with said marker.

92. **(Currently amended)** The method of claim 87, wherein said pathogenic agent is selected from the group consisting of Salmonella, Escherichia, Klebsiella, Pasteurella, Bacillus, Clostridium, Corynebacterium, Mycoplasma, Ureaplasma, Actinomyces, Mycobacterium, Chlamydia, Chlamydophila, Leptospira, Spirochaeta, Borrelia, Treponema, Pseudomonas, Burkholderia, Dichelobacter, Haemophilus, Ralstonia, Xanthomonas, Moraxella, Acinetobacter, Branhamella, Kingella, Erwinia, Enterobacter, Arozona, Citrobacter, Proteus, Providencia, Yersinia, Shigella, Edwardsiella, Vibrio, Rickettsia, Coxiella, Ehrlichia, Arcobacteria, Peptostreptococcus, Candida[[.]], Aspergillus, Trichomonas, Bacterioides, Coccidiomyces, Pneumocystis, Cryptosporidium, Porphyromonas, Actinobacillus, Lactococcus, Lactobacillua, Zymononas, Saccharomyces, Propionibacterium, Streptomyces, Penicillum, Neisseria, Staphylococcus, Campylobacter, Streptococcus, Enterococcus, Helicobacter, human immunodeficiency virus (HIV), Varicella-Zoster virus (VZV), herpes simplex virus (HSV), human papillomavirus (HPV), Hepatitis B virus (HBV), Hepatitis A virus (HAV), rhinovirus, echovirus, Coxsackievirus, cytomegalovirus, flavivirus, Ebola virus, paramyxovirus, influenza virus, enterovirus, Epstein-Barr virus, Marburg virus, polio virus, rabies virus, rubella virus,

smallpox virus, rubeola virus, vaccina virus, adenovirus, rotavirus, Hepatitis C virus (HCV) and Hepatitis B virus (HBV).

93.-136. **(Canceled)**

137. **(New)** The method of Claim 81, wherein the change in the level of said cell surface marker is indicative of whether a subject will respond to a therapeutic intervention.

138 **(New)** The method of Claim 81, wherein the change in the level of said cell surface marker is predictive of an outcome of a therapeutic protocol.